

JUL 10 2006

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FACSIMILE COVER SHEET

TO: U.S. Patent & Trademark Office
Central Facsimile

FROM: Frank L. Cire (Reg. No.: 42,419)

RE: U.S. Application No. 09/977,318
Attn: Examiner C. Larose
Group Art Unit 2624
Atty. Docket No. 03500.015887.

FAX NO.: (571) 273-8300

DATE: July 10, 2006**NO. OF PAGES:** 10
(including cover page)

TIME: 3:25 pm**SENT BY:** Dawn M.

MESSAGE

Transmitted herewith is an Amendment and an Amendment Transmittal in response to the
Office Action dated April 10, 2006.

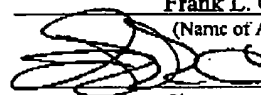
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July 10, 2006

(Date of Transmission)

Frank L. Cire (Reg. No. 42,419)

(Name of Attorney for Applicant)



Signature

July 10, 2006

Date of Signature

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JUL 10 2006

In re Application of:

YASUO FUKUDA

Application No.: 09/977,318

Filed: October 16, 2001

Docket No. 03500.015887.

Examiner: C. Larose

Group Art Unit: 2624

Date: July 10, 2006

For: IMAGE PROCESSING METHOD, APPARATUS THEREFOR AND STORING MEDIUM

Mail Stop Amendment
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional claims fee is required.

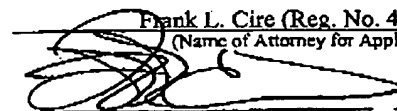
The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 5	MINUS	** 39	= 0	x \$25 \$50	-0-
INDEP. CLAIMS	* 3	MINUS	*** 8	= 0	x \$100 \$200	-0-
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT—						-0-

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

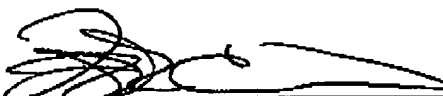
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*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

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to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-
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(Date of Transmission)Frank L. Cire (Reg. No. 42,419)
(Name of Attorney for Applicant)
SignatureJuly 10, 2006
Date of Signature

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Frank L. Cire
Attorney for Applicant
Registration No.: 42,419

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Form #120

CA_MAIN 115934v1

JUL 10 2006

03500.015887.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: C. Larose
YASUO FUKUDA)
: Group Art Unit: 2624
Application No.: 09/977,318)
:
Filed: October 16, 2001)
:
For: IMAGE PROCESSING METHOD,)
: APPARATUS THEREFOR AND)
: STORING MEDIUM) July 10, 2006

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated April 10, 2006, please amend the
above-identified application as follows.

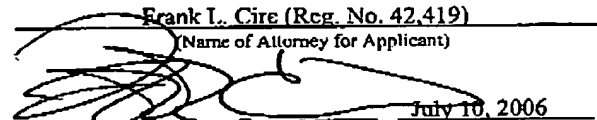
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